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DECLARATION			Attorney Do	cket Number	CRD-5051	
AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION		·	First Named		HOJEIBANE	
			COMPLETE IF KNOWN			
(37 CFR 1.6			Application I	Number		
□ Declaration Submitted with □ □ Initial Filing OR		ırcharge	Filing Date		October 31, 2003	
, , ,			Group Art U	nit		
			Examiner N	ame		
As a below named inventor, I hereby declare that:						
My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:						
IMPLANTABLE VALVULAR PROSTHESIS (Title of the Invention)						
the specification of which						
is attached hereto						
OR						
was filed on (MM/DD/YYYY) as United States Application Number or PCT International Application Number and was amended on (MM/DD/YYYY)						
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.						
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.						
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.						
Prior Foreign Application Number(s)	Country		Filing Date D/YYYY)	Priority Not Claime	Certified Copy d Attached? YES NO	
Additional foreign application nu	imbers are listed	on a suppl	emental priori	dy data sheet P		

DECLARATION - Utility or Design Patent Application						
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.						
Application Number(s) Filing Date (MM/DD/YYYY)						
Application (tallison(c)	1 11113 5 4110 (11111 5 5 7 7 7 7 7	Additional provisional application				
•	•	numbers are listed on a				
		supplemental priority data sheet				
		PTO/SB/02B attached hereto.				
•		•				
I hereby claim the benefit under Title 35. Ur	nited States Code, §120 of any United State	s application(s) listed below and, insofar				
	of this application is not disclosed in the prior					
	United States Code, §112, I acknowledge the					
	tions, §1.56(a) which occurred between the	tiling date of the phor application and the				
national or PCT international filing date of the						
Application Serial No.	Filing Date	Status				
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as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United						
States Patent and Trademark Office conn						
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Address all telephone calls to Vincent J. Serrao at telephone number (732) 524-1163.						
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on informati in and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor **Family Name** Given Name HOJEIBANE or Surname (first and middle [if any]) Hikmat Inventor's Signature Date State NJ **Country US Citizenship**US Residence: City Princeton Mailing Address 91 Adams Drive State NJ ZIP 08540 **Country USA** City Princeton I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor **Family Name** Given Name or Surname MAJERCAK (first and middle [if any]) David Christopher inventor's Signature Date Residence: City Stewartsville State NJ Country US CitizenshipUS Malling Address 519 Madison Drive City Stewartsville State NJ · ZIP 08886 Country US I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. NAME OF THIRD INVENTOR: A petition has been filed for this unsigned inventor Given Name **Family Name** (first and middle [if any]) or Surname inventor's Signature Residence: City State Country Citizenship **Mailing Address** State ZIP City Country